FEE CALSTLATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

CLAIMS

	AS FILED		AFTER 1"AMENDMENT		AFTER	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2		/				
3						
4		-				
5						
6						
7						
8						ļ
9						
10	-]				
11						ļ
12 13						·
14						-
15		-			-	
16						
17		1	l			
18				-		
19						
20		 		-		
21		ļ		l		
22		 				i
23			-		 	
24				l		
25		·		 		1
26			1	1	l — —	i
27			1			1
28						
29						
30						
31						
32						<u> </u>
33		<u> </u>			ļ	<u> </u>
34		<u> </u>			1	<u> </u>
35		<u> </u>		<u> </u>	ļ	1::-
36		ļ	<u> </u>	ļ	ļ	<u> </u>
37			1	ļ	!	
38		<u> </u>	ļ	ļ	!	
39		ļ	<u> </u>		}	
40		<u> </u>	<u> </u>	 	!	<u> </u>
41			 	 	 	
42	<u> </u>	 	 	 	-	
43		 	 	 	 	
44	 		1	 	1	
45	 	1	 	1	 	1
46 47			1	1	1	
48	 -		1	1	1	1
49	-	1	1	1	1	1
50	 	 	1	1	1	1
FOTAL IND.	3	1		B		4
TOTAL DEP	5			4 2		♦ ■ .
TOTAL	0.	05	1	22	<u> </u>	
CLAIMS	0	30000	: [المنطقة الما	2 [Jacob Bridge

	AS FILED		AFTER I AMENDMENT		AFTER 2 ** AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51 52						
53						
54						
55						
56						
57						
58		ļ				
59 60		 				
61						
62						
63						
64 .						
_65			ļ			
66						
67 68		-				
69					<u> </u>	
70						
71						
72						
73						
74		ļ	L	ļ		
75 76	<u> </u>			ļ		
77		ļ		 		
78				 		
79						
80						
81		-	 	ļ		
82 83		-			ļ	
84		-		1	!	
85		 		1	}	
86		3				
87					· ·	
88	 	ļ			1	
89	 	 	! -		-	
90 91		-	 	1	-	
92	1	1	 	1	 	1
93						
94						
95		ļ			!	<u> </u>
96 97		 	!	 	<u> </u>	
98	 	1	1	 	1	1
99	1	1	 	 	 	\vdash
100						
TOTAL IND		\$		1		1
TOTAL DEP		4		₹ ¤		♦ ■
TOTAL CLAIMS				問題		10000

U.S. DEPARTMENT of COMMERCE